

BULLETIN

Social worker uses full spectrum of skills to serve patients, families, and health team

April 1, 2001

The Report: April / May 2001 vol.22 num.2

by DAN KEETON

Leslie Sofarelli Social Worker Intensive Care Unit, St. Paul's Hospital

Leslie Sofarelli might rival some of the best gumshoes in the business with her success rate in tracking down long-lost relatives, but you'd be hard-pressed to find a private investigator who could bring half the compassion to their work that the St. Paul's ICU social worker does every day.

In a given work day, social worker Sofarelli might do some or all of the following: comfort families of deceased patients, search for the identity of an anonymous patient, or link up relatives with family members they haven't seen or heard from for decades.

Sofarelli works in the Intensive Care Unit (ICU) at St. Paul's hospital in downtown Vancouver, the health care centre that receives some of the most serious cases in the Lower Mainland. Victims of drug overdoses, stabbings, and other social mayhem comprise a large part of St. Paul's ICU roster. It sounds like a recipe for high stress and burnout ... but not for Sofarelli.

"I find it to be not that bad at all," she said.

"It's not stressful for me; it's enjoyable. I look forward to going to work each day because I'm providing a key service to families and hospital staff."

As a social worker on an ICU ward, Sofarelli's spectrum of roles includes being a "vital link" between medical staff and patients' families, a source of information, an intervenor in crisis situations and, especially, a grief counsellor.

"A lot of nurses ask me to intervene when dealing with families of patients. It can get quite overwhelming," Sofarelli said.

A full-time social worker in the ICU is a relatively recent position at St. Paul's. Sofarelli was hired as the first full-time social worker in October 1999 as it was made increasingly clear the health care team would benefit from the assistance of a health care professional focussed on the emotional needs of the patients and their families. The move demonstrates a move away from a purely mechanistic view of health care, Sofarelli said.

"It's now more about the person being three-dimensional. It's the whole picture, including factors such as family and community support."

-We function as part of a team, along with therapists and other workers, to enhance a patients quality of life in many spheres, including spiritual and religious."

Sofarelli can list several triumphs from her work, but the one shes proudest of came last summer.

-We had a young patient with a chronic disease. He was in a coma and expected to die within a couple of weeks. He was a student at Simon Fraser University and a good one, and he would have completed his courses within two weeks. We felt he should receive his degree," she remembers.

Sofarelli started making phone calls, and by the end of the day she had a commitment from the university. Later that week SFU officials were at the young patients bedside to conduct a graduating ceremony and confer his Bachelors degree.

-The next day he rallied. He told us he approved of what wed done on his behalf, but said he would work to earn the degree anyway." However, the young student died after living another 100 days.

Sofarelli also has to be a skilled detective in her job. In one case, her research resulted in the discovery of a family member the patient hadnt seen for 52 years. Finding next-of-kin is challenging work, but Sofarelli estimates she is successful 90 percent of the time.

Sofarelli was inspired to become a social worker because of a cousin -who chose the wrong path" back in her native New York City. She felt the social workers at that time had failed her cousin because they lacked therapeutic competence.

She has worked in US hospitals and has operated a one-on-one private counselling practice, and moved to BC just over three years ago.

While she considers the practice of social work fairly uniform across North America, Sofarelli does note a crucial difference between health delivery in the US and Canada. In US hospitals, she spent a good deal of her time dealing with private health insurers.

-In Canada, you can actually be more of a social worker, because you have more time," she said.

-Canada treats health care as a right. I like that philosophy." Nonetheless, Sofarelli worries that regionalization ... with its emphasis on centralized services ... is leading to a heavier and unmanageable workload for BC health care workers.

Sofarelli is an HSA steward, a role she said she sought mainly out of curiosity.

-Were not unionized in the States. I come from a non-union family. If I dont know what something is about, I like to get involved in it so I can form an educated opinion.

-My overall experience at St. Pauls is positive. I value my experience, and feel very fortunate to have a job that I really like."

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